

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: 46770/222 (EBC-014)										
<p><b>CERTIFICATE OF MAILING</b>  I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO at _____, on _____.</p> <p>Signature: _____  Name: _____</p>												
<p>In re Application of: Zhong-Min Wei</p> <p>Application Number: 10/538,274   Filed: December 15, 2003</p> <p>For: METHOD FOR INCREASING THE EFFICACY OF AGRICULTURAL CHEMICALS</p> <p>Group Art Unit: 1616   Examiner: Alton N. Pryor</p>												
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p> <table> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$65/\$130)</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$245/\$490)</td> <td>\$ 245</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$555/\$1110)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$865/\$1730)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1175/\$2350)</td> <td>\$ _____</td> </tr> </table> <p><input checked="" type="checkbox"/> Applicant claims small entity status.</p> <p><input type="checkbox"/> A check to cover the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>505409</u>. I have enclosed a duplicate copy of this sheet.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input type="checkbox"/> attorney or agent of record.</p> <p><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>65,668</u>.</p> <p style="text-align: center;">_____ /Megan L. Thisse/ Signature</p> <p style="text-align: right;">March 7, 2011 Date</p> <p style="text-align: center;">_____ Megan L. Thisse Typed or printed name</p> <p style="text-align: right;">(585) 270-2110 Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of 1 form is submitted.</p>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$65/\$130)	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$245/\$490)	\$ 245	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$555/\$1110)	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$865/\$1730)	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1175/\$2350)	\$ _____
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